



PLEASE PLACE LABEL IN THIS SPACE

BOOK BUICK INC.
66 WASHINGTON AVENUE
NUTLEY, NJ 07110

COMMENTS

[illegible]

INSTALLATION'S EPA I.D. NUMBER													APPROVED		DATE RECEIVED (yr., mo., & day)						
S	N	J	D	0	1	1	5	6	7	4	7	6	TIA	C			4	0	3	0	5
1	2											13	14	15	16	17			22		

[illegible]

STREET OR P.O. BOX

[illegible]

		CITY OR TOWN	ST.	ZIP CODE
C 4		NUTLEY	NJ	07710
15	16			

STREET OR ROUTE NUMBER

[illegible]

CITY OR TOWN															ST.		ZIP CODE			
5																				
6	N	U	T	L	E	Y									NJ		0	7	7	1
15	16														40	41	42	43	44	45

NAME AND TITLE (last, first, & job title)

2	BOOK WILLIAM PRES.	301-667-0500
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A. NAME OF INSTALLATION'S LEGAL OWNER

BOOK WILLIAM + LENORE R.

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F = FEDERAL
M = NON-FEDERAL

M
36

☒ A. GENERATION

☐ B. TRANSPORTATION (complete item VII)☐ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR

☐ B. RAIL

C. HIGHWAY

☐ D. WATER

☐ E. OTHER (specify):

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION

☐ **B. SUBSEQUENT NOTIFICATION** (complete item C)

C. INSTALLATION'S EPA I.D. NO.

[illegible]

Please go to the reverse of this form and provide the requested information.

I.D. - FOR OFFICIAL USE ONLY																	
S															T/A	C	
W																1	
1	2														13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

W Book

NAME & OFFICIAL TITLE (type or print)

Pres.

DATE SIGNED

3/1/84

EPA Form 8700-12 (6-80) REVERSE

Send to:

EPA Region 11, Information Service Center
26 Federal Place
New York, NY 10007

Mar 5 3 55 PM '84
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

State of New Jersey
Department of Environmental Protection and Energy
U.S. EPA
AGENCY RO II
Manifest Section
CN 421, 401 East State Street
Trenton, New Jersey 08625-0421
95 FEB -6 PM 3:25

NJX 000328088
1-26-95

"Request to Deactivate EPA ID Number"

EPA ID No. NJD011567476

Company Name: Book Chevrolet Buick, Inc.

Site Address: 66 Washington Avenue Nutley,
(street) (city / town)
NJ 07110
(state) (zip code) (lot) (block)

Mailing Address: Harold Hazell Inc.
(street / p.o. box) (city / town)
(state) (zip code)

Company Contact: Harold Hazell (201) 667-0500
(name) (area code and phone number)

Reasons for deactivating EPA ID No. (Check all appropriate boxes.)

- ☐ The EPA ID number was obtained for a one time cleanup which is completed.
- ☐ The site has completed an ECRA cleanup (indicate ECRA Case # _____).
- ☒ Other We have reduced amount used and stored

Is the site presently occupied? (circle yes or no)

Sign and date the application below, and retain the last page (pink copy) for your records.

Jon Book
(printed name)
VP
(title)

[Signature]
(signature)
1-24-95
(date)

Submission of false information is a violation of N.J.A.C. 7:26-5.6 and N.J.A.C. 7:26-7.3.

copies: White - Manifest Section
Yellow - USEPA Region II
Pink - Applicant

ND 2/14/95 L/R - L NLO